

Big Mama's Hole in the Wall

Type of project

Address of site (number and street, city, state, and ZIP code) 205 N O'Brien St., Seymour, Indiana, 47274

INSTRUCTIONS: Please refer to the attached four (4) page instructions.

Attach additional pages as needed to complete this application.

INDIANA DEPARTMENT OF HOMELAND SECURITY CODE SERVICES SECTION

302 West Washington Street, Room W246 Indianapolis, IN 46204-2739 http://www.in.gov/dhs/fire/fp bs comm code/

395865

Jackson

Variance number (Assigned by department)



18-05-01 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of applicant Title Nicole Booker Owner Name of organization Telephone number Big Mama's Hole in the Wall (812) 314-9246 Address (number and street, city, state, and ZIP code) 617.5 E. 2nd St., Seymour, Indiana, 47274 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant) Title Name of applicant N/A N/A Name of organization Telephone number N/A (N/A) N/A Address (number and street, city, state, and ZIP code) N/A 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number Stephen V. Miller AR00033979 Name of organization Telephone number Miller Architects (812) 988-7461 Address (number and street, city, state, and ZIP code) 104 S Jefferson St., Nashville, Indiana 47448 4. PROJECT IDENTIFICATION County Name of project State project number

∐ New				☐ Existing			
5. REQUIRED AD	DITIONAL INFOR	MATION					
The following required information has been included with this application (check as applicable):							
A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions)							
One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives.							
Written documentation showing that the local fire official has received a copy of the variance application.							
Written documentation showing that the local building official has received a copy of the variance application.							
6. VIOLATION INFORMATION							
Has the Plan Review Section of the Division of Fire and Building Safety issued a Correction Order?							
☐ Yes (If yes, attach a copy of the Correction Order.) ☐ No							
Has a violation been issued?							
☐ Yes (If yes, attach a copy of the Violation and answer the following.) ☐ No							
Violation issued by:		•					
Local Building	g Department	☐ State Fire and I	Building Code Enforcement Sect	ion			

7. DESCRIPTION OF REQUESTED VARIANCE						
Name of code or standard and edition involved	Specific code section					
Indiana Administrative Code, 2017 Edition		Title 675, Article 12, Chapter 13, Section 3				
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) Detached Class 2 accessory structures are not a permitted conversion using Rule 13, unless a variance has been granted. For a full description of spaces, equipment, entrance, exits, and design features — please see the attached plans provided by Miller Architects.						
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND W	ELFARE WILL BE PROTECTED					
Select one of the following statements:						
Non-compliance with the rule will not be adverse to the public health, safety or welfare; or						
Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (be specific).						
Facts demonstrating that the above selected statement is true: The existing building was a residential garage structure that is planned to be converted into a very small restaurant and will have no indoor seating. The variance is required because of a Class 2 conversion not being eligible under Rule 13 without a variance.						
The existing building has a slab floor and mostly, CMU walls with some wood framed and a truss roof. The structure is in good condition.						
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALL	V SIGNIFICANT STRUCTURE					
Select at least one of the following statements:	a StatumoAut of Nocions					
Imposition of the rule would result in an undue hardship (unusua	difficulty) because of physical limitations of the cons	struction site or its utility services.				
Imposition of the rule would prevent the preservation of an archit						
	octainly of a motorisary organization					
Facts demonstrating that the above selected statement is true: Imposition of the rule would result in undue hardship on the basis that it would equate to absorption of costs for demolition of the existing structure, as well as excessive costs for new construction. Imposition of the rule would also prevent the preservation of the architecture in it's entirety, as the existing structure would have to be demolished in order to execute the design plans. The existing structure is in good condition, and has passed all State mandated inspections. Resultantly, the Construction Design Release was rendered by the Indiana Department of Homeland Security, Division of Fire & Building Safety - Plan Review Division on 12/13/2017 (with the condition that a variance be achieved from the Fire Prevention and Building Safety Commission).						
10. STATEMENT OF ACCURACY						
I hereby certify under penalty of perjury that the information contained in this application is accurate.						
Signature of applicant or person submitting application	Please print name	Date of signature (month, day, year)				
funda forta	Nicole Booker Please print name	Date of signature (month, day, year)				
Signature of design professional (if applicable)	'	01/03/18				
	Stephen V. Miller					
11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement.)						
I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.						
Signature of applicant	Please print name	Date of signature (month, day, year)				
	N/A	N/A				



Local Building Department

APPLICATION FOR VARIANCE

State Form 44400 (R7 / 10-13) Approved by State Board of Accounts, 2013

INDIANA DEPARTMENT OF HOMELAND SECURITY CODE SERVICES SECTION

302 West Washington Street, Room W246 Indianapolis, IN 46204-2739 http://www.in.gov/dhs/fire/fp_bs_comm_code/

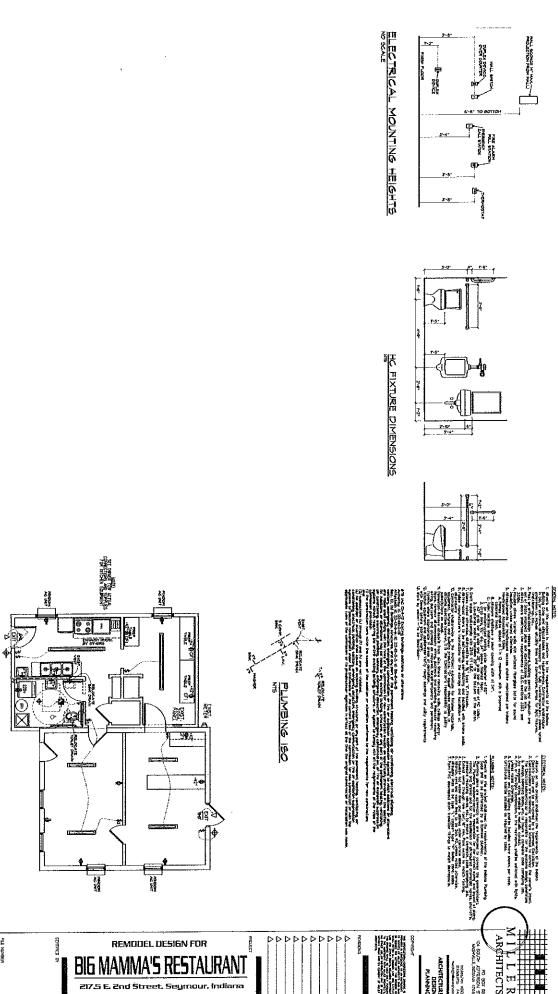


Variance number (Assigned by department) INSTRUCTIONS: Please refer to the attached four (4) page instructions. Attach additional pages as needed to complete this application. 18-05-01 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of applicant Owner Nicole Booker Telephone number Name of organization (812) 314-9246 Big Mama's Hole in the Wall Address (number and street, city, state, and ZIP code) 617.5 E. 2nd St., Seymour, Indiana, 47274 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant) Name of applicant N/A N/A Telephone number Name of organization (N/A) N/A N/A Address (number and street, city, state, and ZIP code) N/A 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number AR00033979 Stephen V. Miller Telephone number Name of organization Miller Architects (812) 988-7461 Address (number and street, city, state, and ZIP code) 104 S Jefferson St., Nashville, Indiana 47448 4. PROJECT IDENTIFICATION County Name of project State project number 395865 Jackson Big Mama's Hole in the Wall Address of site (number and street, city, state, and ZIP code) 205 N O'Brien St., Seymour, Indiana, 47274 Type of project ☐ Change of occupancy Existing ☐ New ☐ Addition 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire and Building Safety issued a Correction Order? ☑ No Yes (If yes, attach a copy of the Correction Order.) Has a violation been issued? Yes (If yes, attach a copy of the Violation and answer the following.) ☑ No Violation issued by:

☐ State Fire and Building Code Enforcement Section

Local Fire Department

7. DESCRIPTION OF REQUESTED VARIANCE							
Name of code or standard and edition involved	Specific code section	'					
Indiana Administrative Code, 2017 Edition		Title 675, Article 12, Chapter 13, Section 3					
Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.) Detached Class 2 accessory structures are not a permitted conversion using Rule 13, unless a variance has been granted. For a full description of spaces, equipment, entrance, exits, and design features — please see the attached plans provided by Miller Architects.							
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND V	VELFARE WILL BE PROTECTED						
Select one of the following statements:							
$oxed{\boxtimes}$ Non-compliance with the rule will not be adverse to the public	Non-compliance with the rule will not be adverse to the public health, safety or welfare; or						
	Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (be specific).						
Facts demonstrating that the above selected statement is true: The existing building was a residential garage structure that is planned to be converted into a very small restaurant and will have no indoor seating. The variance is required because of a Class 2 conversion not being eligible under Rule 13 without a variance.							
The existing building has a slab floor and mostly, CMU walls with some wood framed and a truss roof. The structure is in good condition.							
9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALI	LY SIGNIFICANT STRUCTURE						
Select at least one of the following statements:							
Imposition of the rule would result in an undue hardship (unusua	al difficulty) because of physical limi	tations of the construction site or its utility services.					
Imposition of the rule would result in an undue hardship (unusua	• •	,					
Imposition of the rule would result in an undue hardship (unusua	Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements.						
Imposition of the rule would prevent the preservation of an archi	tecturally or a historically significant	part of the building or structure.					
Facts demonstrating that the above selected statement is true: Imposition of the rule would result in undue hardship on the basis that it would equate to absorption of costs for demolition of the existing structure, as well as excessive costs for new construction. Imposition of the rule would also prevent the preservation of the architecture in it's entirety, as the existing structure would have to be demolished in order to execute the design plans. The existing structure is in good condition, and has passed all State mandated inspections. Resultantly, the Construction Design Release was rendered by the Indiana Department of Homeland Security, Division of Fire & Building Safety - Plan Review Division on 12/13/2017 (with the condition that a variance be achieved from the Fire Prevention and Building Safety Commission).							
10. STATEMENT OF ACCURACY							
I hereby certify under penalty of perjury that the information contained in this application is accurate.							
Signature of applicant or person submitting application	Please print name	Date of signature (month, day, year)					
ful for the	Nicole Booker	1-31-2018					
Signature of design professional (if applicable)	Please print name	Date of signature (month, day, year)					
Stepla Mull	Stephen V. Miller	01/03/18					
11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement.)							
I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.							
Signature of applicant	Please print name	Date of signature (month, day, year)					
	N/A	N/A					



PILE NUMBER
201742

DANNE BY D. HARDEN
CHECKED BY S.V. MILLER
TOLK DATE DISCRIPT

SALE PLAN











ELECTRONICALLY FILE YOUR PROJECT WITH STATE OF INDIANA at http://www.in.gov/dhs/2650.htm.

This on-line filing is through a secure site, you can use it to submit your project information, pay the fees and upload your project plans.

Use Internet Browser to View this report, other browsers are not compatible to view this report

THE STATE OF
M A NUE
1816

CONSTRUCTION DESIGN RELEASE State Form 41191 (R9/5-98)

Report Printed on: December 13, 2017

Indiana Department of Homeland Security DIVISION OF FIRE & BUILDING SAFETY PLAN REVIEW DIVISION 402 W. Washington St., Room E245 Indianapolis, IN 46204 Available At Your Local Licence Branch
SUPPORT HOOSIER SAFETY

To: Owner / Architect / Engineer Big Mama's Hole in the Wall Nicole Booker 205 N. O'Brien St. 617.5 E. 2nd St.

Seymour IN 47274

Fax & e-mail: 8129889755, nnb224@yahoo.com

Project number		Release date	
395865		12/13/17	
Construction type	Occupancy classification		
V-B	В		
Scope of release			
Type of release			
STD-Rule 13			
Project name	and Process		
Big Mama's Hole in the Wall			
Street address			
205 N O'Brien St			
City	County		
SEYMOUR	JACKSON		

The plans, specifications and application submitted for the above referenced project have been reviewed for compliance with the applicable rules of the Fire Prevention and Building Safety Commission. The project is released for construction subject to, but not necessarily limited to, the conditions listed below. THIS IS NOT A BUILDING PERMIT. All required local permits and licenses must be obtained prior to beginning construction work. All construction work must be in full compliance with all applicable State rules. Any changes in the released plans and/or specifications must be filed with and released by this Office before any work is altered. This release may be suspended or revoked if it is determined to be issued in error, in violation of any rules of the Commission or if it is based on incorrect or insufficient information. This release shall expire by limitation, and become null and void, if the work authorized is not commenced within one (1) year from the above date.

Note :(A1A & A1B): In accordance with the affidavit sworn under penalties of perjury in the application for construction design release the plans and specifications filed in conjunction with this project shall comply with all of the applicable rules and laws of Fire Prevention and Building Safety Commission. Providing false information constitutes an act of perjury, which is a Class D felony punishable by a prison term and a fine up to \$10,000.

In accordance with Section 19 of the General Administrative Rules (675 IAC 12-6-19) a complete set of plans and specifications that conform exactly to the design that was released by the office of the state building commissioner shall be maintained on the construction jobsite as well as a copy of the design release.

4G1302AA

This project has been filed, reviewed, and the preliminary inspection has been performed in accordance with 675 IAC 12-13-4(a).

4G1302AB

All construction work done to accomplish the conversion (construction includes alteration) shall be done in accordance with current applicable rules for new construction in accordance with 675 IAC 12-13-2(a).

A variance is required from the Fire Prevention and Building Safety Commission. Class 2 accessory structures are not a permitted conversion under 675 IAC 12-13-3.

Please be advised that if an administrative review of this action is desired, a written petition for review must be filed at the above address with the Fire Prevention and Building Safety Commission identifying the matter for which a review is sought no later than eighteen (18) days from the above stated date, unless the eighteenth day falls on a Saturday, a Sunday, a legal holiday under State statute, or a day in which the Department of Fire and Building Services is closed during normal business hours. In the latter case, the filing deadline will be the first working day thereafter. If you choose to petition, and the before-mentioned procedures are followed, your petition for review will be granted, and an administrative proceeding will be conducted by an administrative law judge of the Fire Prevention and Building Safety Commission. If a petition for review is not filed, this Order will be final, and you must comply with its requirements.

Code review official KEVIN TROY
ktroy@dhs.in.gov

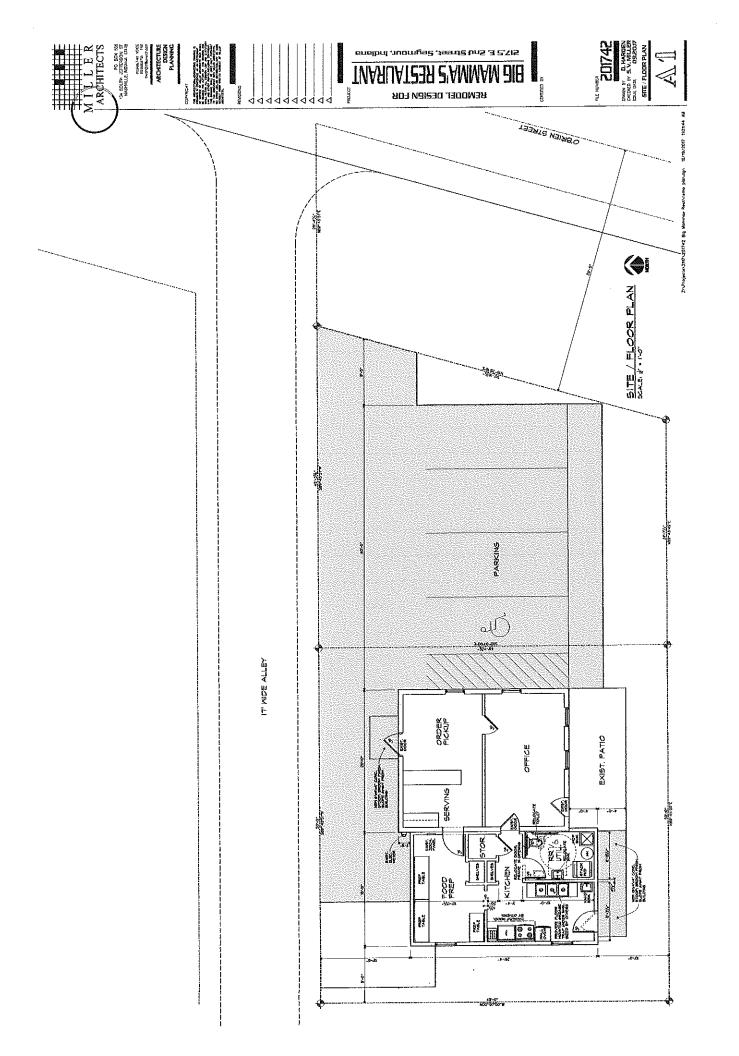
Address (name,title of local official,street,city,state and ZIP code
BUILDING COMMISSIONER
JEREMY GRAY
301-309 N CHESTNUT STREET

SEYMOUR, IN 47274

Fax & e-mail: 8125236687, jgray@seymourin.org

Director, Division of Fire and Building Safety

James & Treeson)



Hayes, Blake

From:

Brad Lucas <blucas@seymourinfire.org>

Sent:

Thursday, April 19, 2018 1:08 PM

To:

jgray@seymourin.org

Cc:

Nicole Booker; Hayes, Blake

Subject:

Re: Variance Application

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

I have received and will review the documents for Big Mommas Home In The Wall. Brad Lucas

Sent from my iPhone

On Apr 19, 2018, at 12:36 PM, < igray@seymourin.org > < jgray@seymourin.org > wrote:

Mr. Hayes I am aware and have a copy of the variance application for Big Mommas Hole In The Wall .

From: Nicole Booker < nnb224@yahoo.com > Sent: Thursday, April 19, 2018 12:03 PM

To: jgray@seymourin.org
Subject: Variance Application

Hello Mr. Gray,

If you need any thing else, just let me know. I will also forward you the email from Mr.Troy. Also could you please copy me on, any emails to the state. It was Mr. Hayes that was requesting the information. His Email Is: blhayes@dhs.in.gov

Thanks For Your Time, Nicole Booker

×

Virus-free, www.avg.com

Hayes, Blake

From:

igray@seymourin.org

Sent:

Thursday, April 19, 2018 12:37 PM

To:

'Nicole Booker'; Hayes, Blake; blucas@seymourinfire.org

Subject:

RE: Variance Application

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

Mr. Hayes I am aware and have a copy of the variance application for Big Mommas Hole In The Wall.

From: Nicole Booker <nnb224@yahoo.com> Sent: Thursday, April 19, 2018 12:03 PM

To: jgray@seymourin.org **Subject:** Variance Application

Hello Mr. Gray,

If you need any thing else, just let me know. I will also forward you the email from Mr.Troy. Also could you please copy me on, any emails to the state. It was Mr. Hayes that was requesting the information. His Email Is: blhayes@dhs.in.gov

Thanks For Your Time, Nicole Booker

x Des

Virus-free. www.avg.com